

APPEAL NO. 161066
FILED JULY 27, 2016

This appeal arises pursuant to the Texas Workers' Compensation Act, TEX. LAB. CODE ANN. § 401.001 *et seq.* (1989 Act). A contested case hearing (CCH) was held on March 10, 2016, with the record closing on April 28, 2016, in Uvalde, Texas, with (hearing officer) presiding as hearing officer. The hearing officer resolved the disputed issues by deciding that: (1) the compensable injury of (date of injury), does extend to a rotator cuff supraspinatus tear and impingement syndrome of the left shoulder; (2) the appellant (claimant) reached maximum medical improvement (MMI) on September 3, 2015; and (3) the claimant's impairment rating (IR) is 10%. The claimant appealed, disputing the hearing officer's determinations of MMI and IR. The claimant argues that the MMI date and IR determined by the hearing officer were inconsistent with the preponderance of the evidence and the designated doctor's own report. The respondent (self-insured) responded, urging affirmance of the disputed MMI and IR determinations.

The hearing officer's determination that the compensable injury of (date of injury), does extend to a rotator cuff supraspinatus tear and impingement syndrome of the left shoulder was not appealed and has become final pursuant to Section 410.169.

DECISION

Reversed and remanded for reconstruction of the record.

Section 410.203(a)(1) requires the Appeals Panel to consider the record at the CCH. No audio recording of the CCH is available for review. The file does not contain a transcript or a tape recording of the proceeding. Consequently, we reverse and remand this case to the hearing officer who presided over the March 10, 2016, CCH, if possible, for reconstruction of the CCH record. See Appeals Panel Decision (APD) 060353, decided April 12, 2006.

Pending resolution of the remand, a final decision has not been made in this case. However, since reversal and remand necessitate the issuance of a new decision and order by the hearing officer, a party who wishes to appeal from such new decision must file a request for review not later than 15 days after the date on which such new decision is received from the Texas Department of Insurance, Division of Workers' Compensation, pursuant to Section 410.202 which was amended June 17, 2001, to exclude Saturdays and Sundays and holidays listed in Section 662.003 of the Texas Government Code in the computation of the 15-day appeal and response periods. See APD 060721, decided June 12, 2006.

The true corporate name of the insurance carrier is **EAGLE PASS INDEPENDENT SCHOOL DISTRICT (a self-insured governmental entity)** and the name and address of its registered agent for service of process is

**DELIA HERNANDEZ
70 NORTH EAST LOOP 410, SUITE 800
SAN ANTONIO, TEXAS 78232.**

Margaret L. Turner
Appeals Judge

CONCUR:

K. Eugene Kraft
Appeals Judge

Carisa Space-Beam
Appeals Judge